

REQUEST FOR REIMBURSEMENT
OR PAYMENT

1. YOUR TR NO.

1130R000100100024-3

3. NAME OF CLAIMANT (LAST, FIRST, MIDDLE INITIAL)

JOHNSON, Bruce T.

4. EMPLOYEE NO.

5. OFFICE

Chairman/FAC
(D/ODP)

PAYABLE TO

Bruce T. Johnson

ROOM

2D00

BUILDING

HQS

EXT

UNIT

\$5.62

25X1

6. PROJECT NUMBER

7. TYPE OF ADVANCE

8. ACTIVITY NUMBER

9. DUE DATE

PURPOSE (FIRST 24 CHARACTERS OF EACH LINE WILL BE ENTERED):

10. WHAT: Lunch for Vincent Melzac

11. WHERE: EDR

12. WHEN: 29 October 1982

13. WHY: For the purpose of maintaining a working relationship on behalf of the Fine Arts Commission with a noted art doner.

16. OBLIGATION REFERENCE NO.

14. EXP
CODE

15. AGENCY
CODE

TYPE ORN	SUB #	17. SOC	LIQ CD	18. AMOUNT
P				
S				
S				
S				

I CERTIFY FUNDS ARE AVAILABLE

DATE AUTHORIZED SIGNATURE

AUTHENTICATION

DATE SIGNATURE OF APPROVING OFFICER

CERTIFICATE FOR PAYMENT OR CREDIT

DATE SIGNATURE OF CERTIFYING OFFICER

PAYMENT INSTRUCTIONS

DESIGNATION OF AGENT TO PICK UP FUNDS

I authorize my agent, whose signature appears below, to receive \$ of official funds on my behalf and acknowledge receipt of such funds and my responsibility therefor, when paid to my agent.

DATE 11/16/82
DATE 11/16/82
SIGNATURE OF AGENT

AMOUNT CHECK NO.

DATE SIGNATURE

CERTIFICATION (Check when applicable)

☐ REIMBURSEMENT

I certify that the disbursements itemized above were necessarily made by me and that I have not been nor will I be reimbursed therefor from any other source and that this claim and attachments are true and correct.

☐ PERSONAL SERVICES

The amount requested is due the payee for satisfactory performance of duties in accordance with the terms of his contract or other.

DATE 11/16/82 SIGNATURE [Signature]

Bruce T. Johnson

TRANS
CODE

CODING AREA

MONETARY
CONTROL

AMOUNT

DATE

PREPARED BY

EXT

DATE

REVIEWED BY

TOTAL

EXECUTIVE DINING ROOM
ROOM 3E14 HQSBRUCE JOHNSON
2D-0105 HQSACCOUNT NUMBER: 20099
STATEMENT NUMBER: 10-108
DATE: 82/10/31

AMOUNT ENCLOSED:\$ (MAKE CHECK PAYABLE TO EDR FUND)

(PLEASE RETURN THIS PORTION WITH YOUR REMITTANCE)

CUT>=====<CUT

DATE:	UNIT DESCRIPTION	AMOUNT:	SURCHARGE:
	PREVIOUS BALANCE =	11.41	
82/10/28	1 REGULAR LUNCH	3.85	.39
	1 REGULAR LUNCH	3.85	.39
	1 REGULAR LUNCH	3.85	.39
	1 SOUP	.75	.08
	1 DESSERT	.50	.05
	1 DESSERT	.50	.05
	1 DESSERT	.50	.05
82/10/31	FINANCE CHARGE ON 11.41	.17	
	TOTAL SURCHARGES:	1.40	

4.24
.83
= .55
5.62

BALANCE NOT PAID BY END OF MONTH SUBJECT TO FINANCE
CHARGE. --- MONTHLY RATE: 1.5%, ANNUAL RATE: 18%

ACCOUNT STATUS:
15.37 0.17 11.24 0.00

CURRENT 30 DAY 60 DAY 90 DAY

NEW BALANCE = \$ 26.78

ROUTING AND RECORD SHEET

SUBJECT: (Optional)

Request for Approval to Incur Expenses Under

DD/A Registry

82-1131/3

STAT

FROM:

Bruce T. Johnson
Chairman, Fine Arts Commission
2D00 Headquarters

EXTENSION

NO.

DATE

28 OCT 1982

STAT

TO: (Officer designation, room number, and building)

DATE

RECEIVED

FORWARDED

OFFICER'S INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

1. C/AS/ODP
2D0105 Hqs

WGA

De

INFORMATION

2.

3. DDA
7D18 Hqs

28 OCT 1982

Jm

APPROVAL

4.

5. AO/DCI
7C17 Hqs

INFORMATION

6.

7. DCI/B&F
7C17 Hqs

Jm

CERTIFICATION

8.

9. EXDIR
7E12 Hqs

APPROVAL

10.

11. Chairman/FAC
2D00 Hqs

12.

13.

14.

15.

28 OCT 1982

DD/A Registry

82-1131/3

MEMORANDUM FOR: Executive Director

VIA: Deputy Director for Administration
Administrative Officer, DCI

FROM: Bruce T. Johnson
Chairman, Fine Arts Commission

SUBJECT: Request for Approval to Incur Expenses Under

[REDACTED]

1. Approval is requested to incur expenses allowed under

[REDACTED]

2. I believe the expenditure of appropriate funds is authorized under [REDACTED] for the costs of a lunch on 29 October 1982 for the purpose of maintaining a working relationship on behalf of the Fine Arts Commission with a noted art donor.

3. My guest will be Mr. Vincent Melzac, from whose personal collection have been borrowed many of the art works on display in the Headquarters building. Mr. Melzac's attendance is considered essential to continue the liaison between Mr. Melzac and the Fine Arts Commission.

4. The estimated cost of this luncheon is \$8. No claim is made for my lunch.

[REDACTED]

Bruce T. Johnson

APPROVAL:

[REDACTED]

Deputy Director for Administration

10/28/82
Date

I certify the availability of funds in the amount indicated in paragraph 4.

[REDACTED]

Budget and Fiscal Officer, DCI

11/2/82
Date

SUBJECT: Request for Approval to Incur Expenses Under

STAT

APPROVAL:

Executive Director

2 Nov 82.
Date

STAT

Approved For Release 2005/08/22 : CIA-RDP87-01130R000100100024-3

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